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APPLICANTS

Roger Tallerico, Ogden, UT;  
 Richard Welford, Layton, UT;  
 Kurt Gammill, Layton, UT;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 01/20/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <input checked="" type="checkbox"/> Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	STATE OR COUNTRY UT	SHEETS DRAWING 6	TOTAL CLAIMS 28	INDEPENDENT CLAIMS 4
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ADDRESS  
 Sally J. Brown  
 AUTOLIV ASP, INC.  
 3350 Airport Road  
 Ogden, UT  
 84405

TITLE  
 Inflatable cushion retention system

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